

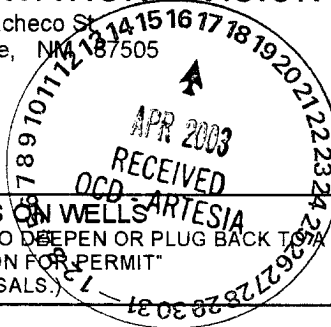
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505



WELL API NO. 30-015-29851
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No. 21595
Lease Name or Unit Agreement Name Carlsbad 22 State Com
Well No. 1
Pool name or Wildcat Avalon Strawn

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
Name of Operator Mewbourne Oil Company 14744	
Address of Operator PO Box 5270, Hobbs, New Mexico 88241	
Well Location Unit Letter C 896 Feet From The North Line and 1764 Feet From The West Line Section 22 Township 21S Range 26E NMPM Eddy County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3225' GL	

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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Strawn & Morrow commingle ☒

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

02/15/03...MI & RU PU. POOH w/ tbg & pkr. GIH & Clean out CIBP's & Cement @ 9870 & 11002' w/ foam.
Clean out to PBTD @ 11189'. Circl hole clean.

02/23/03...Run in hole w/ tbg to 11057'.

02/25/03...Commingle Strawn @ 9668-9965' & Morrow @ 11062-11072'. Put well on Production.

DHC approval required BCF
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE N.M. Young TITLE District Manager DATE 03-30-03

TYPE OR PRINT NAME N.M. Young TELEPHONE NO. 505-393-5905

(This space for State Use)

APPROVED BY Jim W. Gunn TITLE District Supervisor DATE APR 24 2003

CONDITIONS OF APPROVAL, IF ANY: